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APPLICANTS

George M. Braceras, Essex Junction, VT;

Reid C. Hutchins, Burlington, VT;
Harold Pilo, Underhill, VT;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	VT	DRAWING 8	CLAIMS 21	CLAIMS 4
Verified and Acknowledged	<i>[Signature]</i> <i>[Initials]</i>				
	Examiner's Signature Initials				

ADDRESS

31647
 DUGAN & DUGAN, P.C.
 55 SOUTH BROADWAY
 TARRYTOWN, NY
 10591

TITLE

SCALABLE TERMINATION

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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